



ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>ASB</i>		<i>1/8/01</i>
FORMALITY REVIEW	<i>T.A.</i>	<i>JC 844</i>	<i>02/06/01</i>
RESPONSE FORMALITY REVIEW	<i>R.B.</i>	<i>1076</i>	<i>06/05/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) ... Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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